## PART B - FEE(S) TRANSMITTAL

/O. 4018	\	her with applicable	, 	P.O	Box 1450 xandria, Virginia	atents a 2231:	3-1450	,	
INSTRUCTIONS: This sopropriate. All further splicated unless con-	form should be used forespondence including the control of the con	for transmitting the ISSI og the Patent, advance o perwise in Block 1, by (	UE FEE and PUBLIC rders and polification a) specifying a new c	of m	ON FEE (if required saintenance fees will condence address; an	). Block be maile d/or (b)	is I through 5 sl ed to the current indicating a sepa	hould be completed where correspondence address as trate "FEE ADDRESS" for	
CORD ELECTRIC DESIPONDENCE ADDRESS (Note: Use Block I for any change of actives)					Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
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LOS ANGELES, CA 90010					Simon K. Shi		(Depositor's name)		
		/Simon K. Shim/			(Signature)				
				L	04/01/2008			(Dece)	
APPLICATION NO.	APPLICATION NO. FILING DATE		FIRST NAMED INVENTO		OR ATTORNEY DOCKET		Y DOCKET NO.	CONFIRMATION NO.	
10/553,458 10/17/2005 Jae Ho Hong 2017-036 6980 TITLE OF INVENTION: BICYCLE DRIVE UNIT OF MULTI PEDALING TYPE 64/62/2008 NIGUYEN2 68886825 16553458								6980 <b>25 16553458</b>	
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APPLN. TYPE	SMALL ENTITY	issue fee due	PUBLICATION FEE I	)UE	PREV. PAID ISSUE FI	EB TO	TAL FEE(S) DUE	DATE DUE	
lanoisivorquon	YES	\$720	\$300		20		\$1020	04/14/2008	
EXAM	EXAMINER		CLASS-SUBCLASS	S-SUBCLASS			•		
ARCE DIAZ,	280-260000								
1. Change of corresponde CFR 1.363).  Change of corresp Address orm PTO/Si  Fee Address' ind PTO/SB/47; Rev 03-0	2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (baving as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is								
Number is required.	listed, no name wi								
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recordation as set fort (A) NAME OF ASSIG		pletion of this form is NO		CITY	and STATE OR COU	NTRY)		ocument has been filed for	
Please check the appropr	iate assignee category or	categories (will not be pa		_		<del></del>		sup entity Government	
4a. The following fcc(s) are submitted:  4b. Payment of Fcc(s): (Please first reapply any previously paid issue fee shown above)    X   Issue Fee.   A check is enclosed.								shown above)	
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5. Change in Entity Sta			_				······································		
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Authorized Signature	Date 04/01/2008								
Typed or printed name James E. Barne					Registration No.	4452	1		
This collection of inform an application. Confident submitting the complete this form antior suggest Box 1450, Alexandra, V Alexandria, Virginia 223	ation is required by 37 C tiality is governed by 35 i application form to the ons for reducing this hur loginia 22313-1450. DC 13-1450.	FR 1.311. The information U.S.C. 122 and 37 CFR USPTO. Time will vary den, should be sent to the NOT SEND FEES OR opersons are required to re-						loy the USPTO to process) g gathering, preparing, and ne you require to complete ariment of Commerce, P.O. for Patents, P.O. Box 1450, number.	